SPONSOR'S REBUTTAL TO FISCAL NOTE

Bill Number: HB 84   **Date Prepared:** 02/14/2013

Short Title: Revise 72 Hour Presumptive Eligibility Requirements for Crisis Stabilization

Sponsor: Pat Noonan

Fiscal Note Version and Date: As Amended 2-13-13

Generally, why do you disagree with the fiscal note?

1. The average involuntary commitment at MSH totals 83 beds. (From Fiscal Note for HB 16)
2. The average daily cost per bed day at MSH is $507.29 (Based on the costs billed the counties in the Fiscal Note for HB 16) – These costs are 100% general fund.
3. Therefore, the savings from diverting one patient who would have been committed to MSH for an involuntary commitment is approximately $42,105.07 ($507.29 x 83)
4. It is assumed that improving the 72-hour presumptive eligibility program will prevent patients from being committed to Montana State Hospital. If only 4 patients are prevented from going to MSH the state will see $168,420.28 in savings. (42,105.07 x 4) off-setting the current fiscal note on HB 84.

Specifically, what in the fiscal note do you feel is flawed?

1. The average involuntary commitment at MSH totals 83 beds. (From Fiscal Note for HB 16)
2. The average daily cost per bed day at MSH is $507.29 (Based on the costs billed the counties in the Fiscal Note for HB 16) – These costs are 100% general fund.
3. Therefore, the savings from diverting one patient who would have been committed to MSH for an involuntary commitment is approximately $42,105.07 ($507.29 x 83)
4. It is assumed that improving the 72-hour presumptive eligibility program will prevent patients from being committed to Montana State Hospital. If only 4 patients are prevented from going to MSH the state will see $168,420.28 in savings. (42,105.07 x 4) off-setting the current fiscal note on HB 84.

What is your estimate of the fiscal impact?

If only 4 patients are prevented from going to MSH the state will see $168,420.28 in savings. (42,105.07 x 4) off-setting the current fiscal note on HB 84.

Sponsor Signature: _____